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# UNITED STATES DISTRICT COURT

9th	for the District of NO Division	···
11 1/1	Case No.	
I aintiff(s)  (Write the full name of each plaintiff or one is filing this complaint.  If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)  -V-	) ) ) ) )	(to be filled in by the Clerk's Office)
Defendant(s)  (Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names. Do not include addresses here.)	) ) ) )	

# LAINT FOR VIOLATION OF CIVIL RIGHTS

(Prisoner Complaint)

### NOTICE ---

Federal Rules of Civil Procedure 5.2 addresses the privacy and security concerns resulting from public access to electronic court files. Under this rule, papers filed with the court should *not* contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include *only*: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number.

Except as noted in this form, plaintiff need not send exhibits, affidavits, grievance or witness statements, or any other materials to the Clerk's Office with this complaint.

In order for your complaint to be filed, it must be accompanied by the filing fee or an application to proceed in forma pauperis.

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Dro So 14 (Day	12/16) Complaint	for Violation o	f Civil Rights	(Prisoner)
ro Se 14 (Rev.	12/10) Complaint	for violation o	I CIVII KIGIIIS	(TIISOMEI)

I.

	The Plaintiff(s)	••		
	Provide the information below for	each plaintiff named in the c	complaint. Attach a	dditional pages if
	needed.	11-020 111	11:200	
	Name	Alonzo Wil	114713	
	All other names by which			
	you have been known:			
	ID Number			
	Current Institution	450 344	? St S	
	Address			
		Fargo	ND State	58103
÷		J City	State	Zip Code
D	The Defendants			
В.	The Defendant(s:			
	Defendant No. 1	Primo Mar	WILL	
	Name	Ryan you	MUREN Alone A	Hanner
	Name  Job or Title (if known)	Ryan your	Myren Hing A	Horney
	Name Job or Title (if known) Shield Number	Ryan you Prosurce	maren Hing A	Horney
	Name Job or Title <i>(if known)</i> Shield Number Employer	Ryan you Prosurci	maren Hung A	Horney
	Name Job or Title (if known) Shield Number	Ryan you Prosurce		
	Name Job or Title (if known) Shield Number Employer Address		Maren Hyng A ND State	Horney 58103 Zip Code
	Name Job or Title (if known) Shield Number Employer Address		No	58\03 Zip Code
	Name Job or Title (if known) Shield Number Employer Address	Forgo	ND State	58\03 Zip Code
	Name Job or Title (if known) Shield Number Employer Address	Forgo	ND State	58\03 Zip Code
	Name Job or Title (if known) Shield Number Employer Address  Defendant No. 2	Forgo	ND State	58\03 Zip Code
	Name Job or Title (if known) Shield Number Employer Address  Defendant No. 2 Name	Forgo	ND State	58\03 Zip Code
	Name Job or Title (if known) Shield Number Employer Address  Defendant No. 2 Name Job or Title (if known)	Forgo	ND State	58\03 Zip Code
	Name Job or Title (if known) Shield Number Employer Address  Defendant No. 2 Name Job or Title (if known) Shield Number	Forgo	ND State	58\03 Zip Code
	Name Job or Title (if known) Shield Number Employer Address  Defendant No. 2 Name Job or Title (if known) Shield Number Employer	Forgo City  Individual capacity	State Official capa	S & \U 3 Zip Code
	Name Job or Title (if known) Shield Number Employer Address  Defendant No. 2 Name Job or Title (if known) Shield Number Employer	Forgo	ND State	Zip Code

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Pro Se 14	(Rev. 12/16	6) Complaint for Violatics of Civil Righ	ts (Prisoner)	)						
		Defendant No. 3  Name  Job or Title (if known)  Shield Number  Employer  Address	,214.1							
	•				City		State		Zip Code	
				Ind	ividual capacity	L_	Official ca	apacity		
	:	Defendant No. 4  Name of Title ("known)  Shield Number  Employer  Address	aunt							
					Cin		State		Zip Code	
				Inc	City ividual capacity		Official c	apacity	Zip Conc	
II.	Under immun <u>F</u> edera	or Jurisdiction  42 U.S.C. § 1983, you may so ities secured by the Constitute of Bureau of Narcotics, 403 Unitional rights.  Are you bringing suit against a federal officials (a Birel State or local officials)	ion and [ .S. 388 (. st (check a cns elain: (a § 1983	federal language federa	aws]." Under <i>Biv</i> ou may sue federa	vens v.	Six Unknocials for the	own Nan e violati	ned Agent.	s of ain
	B C.	Section 1983 allows claims the Constitution and [federal federal constitutional or state of the constitution and [federal federal constitution and federal federal constitution and federal federal constitutional or state of the constitution of the constitut	al laws]." cutory rig	42 U.S. sht(s) do	C. § 1983. If you you claim is/are b	are speing	uing under violated by	section state or	1983, who local offi	at cials?
	C.	are suing under Bivens, who officials wifts	at constitu	utional ri	ght(s) do you cla	im is/	are being v	riolated l	oy federal	- ) - 4

	D.	Section 1983 allows defendants to be found liable only when they have acted "under color of any statute, ordinance, regulation, custom, or usage, of any State or Territory or the District of Columbia." 42 U.S.C. § 1983. If you are suing under section 1983, explain how each defendant acted under color of state or local law. If you are suing under <i>Bivens</i> , explain how each defendant acted under color of federal law. Attach additional pages if needed.
		False imprisonment. Knew I wasn't the Supect But Kept me incarcerated.
III.	Prisor	ner Status Superct But Kept me incarcerated.
	Indica	te whether you are a prisoner or other confined person as follows (check all that apply):  Pretrial detainee
		Civilly committed detainee
		Immigration detainee
		Convicted and sentenced state prisoner
		Convicted and sentenced federal prisoner
		Other (Capitalin)
IV.	Statem	nent of Claim
	alleged further any cas	s briefly as possible the facts of your case. Describe how each defendant was personally involved in the wrongful action, along with the dates and locations of all relevant events. You may wish to include details such as the names of other persons involved in the events giving rise to your claims. Do not cite ses or statutes. If more than one claim is asserted, number each claim and write a short and plain ent of each claim in a separate paragraph. Attach additional pages if needed.
	A.	If the events giving rise to your claim arose outside an institution, describe where and when they arose.  Rugo voncer, know Improve Guilty OUE
,		Ryan youngeen, Knows Im not guilty DUE to D.W. A and Fingerprints, But is keeping Me locked up
	В.	The events giving rise to your claim arose in an institution, describe where and when they arose.

V.

VI.

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## VII. Exhaustion of Administrative Remedies Administrative Procedures

The Prison Litigation Reform Act ("PLRA"), 42 U.S.C. § 1997e(a), requires that "[n]o action shall be brought with respect to prison conditions under section 1983 of this title, or any other Federal law, by a prisoner confined in any jail, prison, or other correctional facility until such administrative remedies as are available are exhausted."

Administrative remedies are also known as grievance procedures. Your case may be dismissed if you have not exhausted your administrative remedies.

Did your claim(s) arise while you were confined in a jail, prison, or other correctional facility?

	Yes Yes
	□ No
	If yes, name the jail, prison, or other correctional facility where you were confined at the time of the events giving rise to your claim(s).
	Cass County Sail
B.	Does the jail, prison, or other correctional facility where your claim(s) arose have a grievance procedure?
	Yes Yes
	□ No
	Do not know
C.	Does the grievance procedure at the jail, prison, or other correctional facility where your claim(s) arose cover some or all of your claims?
	Yes we was a second of the sec
	No No
	Do not know
	If yes, which claim(s)?

D.	Did gone	you storage sevance in the jail, prison, or other correctional facility where your claim(s) arose cerning the facts relating to this complaint?
		Yes
	X	No
		o, did you file a grievance about the events described in this complaint at any other jail, prison, or er correctional facility?
		Yes
	凶	No
E.	If y	ou did file a grievance:
	1.	Where did you file the grievance?
	: . Vi-	
	2.	What did you claim in your grievance?
··· ,		· ·
	3.	What was the result, if any?
	itys.	
	4	What steps, if any, did you take to appeal that decision? Is the grievance process completed? If
	4.	not, explain why not. (Describe all efforts to appeal to the highest level of the grievance process.)
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	e. kr	

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F	F. If you did not file a grievance:
	1. If there are any reasons why you did not file a grievance, state them here:    (4) 501+ is against State attorney
	2. If you did not file a grievance but you did inform officials of your claim, state who you informed, when and how, and their response, if any:  WY Attorney World K. Johnson  Flease set forth any additional information that is relevant to the exhaustion of your administrative remedies. They have from to over a month of the suspect of the case of the suspect of the exhaustion of your administrative remedies.)
VIII. i	Previous Lawsuits
t l	The "three strikes rule" bas a prisoner from bringing a civil action or an appeal in federal court without paying the filing fee if that prisoner has "on three or more prior occasions, while incarcerated or detained in any facility brought an action or appeal in a court of the United States that was dismissed on the grounds that it is frivolous, malicious, or fails to state a claim upon which relief may be granted, unless the prisoner is under imminent danger of serious physical injury." 28 U.S.C. § 1915(g).
	To the best of your knowledge, have you had a case dismissed based on this "three strikes rule"?
[	Yes
[	No
1	If yes, state which court dismissed your case, when this occurred, and attach a copy of the order if possible.
	The state of the s

A.	Hav acti	ve you filed other lawsuits in state or federal court dealing with the same facts involved in this on?
		Yes
	L XI	No
	لكا	<b>、140</b>
В.	If y	our answer to A is yes, describe each lawsuit by answering questions 1 through 7 below. (If there is than one lawsuit, describe the additional lawsuits on another page, using the same format.)
	1.	Par westto the previous lawsuit
	ą: ,	Plaintiff(s)
		Defendant(s)
	•	
	2.	Court (if federal court, name the district; if state court, name the county and State)
	3.	Docket or index number
	4.	Name of Judge assigned to your case
	_	Approximate date of filing lawsuit
.:	5.	Approximate date of filing lawsuit
		ander en
·	6.	Is, the case still pending?
		Yes
		No
		If no, give the approximate date of disposition.
	7.	What was the result of the case? (For example: Was the case dismissed? Was judgment entered in your favor? Was the case appealed?)
		A to Attend of the
	1 (	Nothing as of yet.

Have you filed other lawsuits in state or federal court otherwise relating to the conditions of your C. imprisonment?

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	Yes
	No
D.	If your answer to C is yes, describe each lawsuit by answering questions 1 through 7 below. (If there is more than one lawsuit, describe the additional lawsuits on another page, using the same format.)
	1. Parties to the previous lawsuit  Plaintiff(s) Alongo Williams  Defendant(s) Fargo Solice Et. Al
	2. Court (if federal court, name the district; if state court, name the county and State)
	9th district 1955 county forgo ND
	3. Docket or index number
	4. Name of Judge assigned to your case
·	5. Approximate date of filing lawsuit
	6. Is the case still pending?
	X Yes
	□ No
	If no, give the approximate date of disposition
	7. What was the result of the case? (For Lample: Was the case dismissed? Was judgment entered in your favor? Was the case appealed?)
	Nothing so Far

### IX. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivologus argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or a specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

### A. For Parties Without an Attorney

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

	Date of signing: /0-/	11-24 America	e '		
	Printed Name of Plaintiff	Alonzo 1	williams		
	Prison Identification #				
	Prison Address	430 34th St 5			
		forgo City	ND State	58/03 Zip Code	
В.	For Attorneys				
	Date of signing:				
	Signature of Attorney				
	Printed Name of Attorney				
	Bar Number				
	Name of Law Firm				
	Address				
		City	State	Zip Code	
	Telephone Number				
	E-mail Address				